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FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1	ORGANIZATIO	ON		
1 Ottom 1	(See instructions)			Office use only
NAME OF COMMITTEE (in f	(Check if name Example) is changed) over	xample: If typying, type ver the lines	12FE4M5	
MOS Holdings	Inc. Political Action Committee ("Mo	saic PAC")		
ADDRESS (number and s	reet) 3033 Campus Drive		1111	
(Check if address	Suite E490	1 1 1 1 1 1 1 1	1111	11111111
is changed)	Plymouth		MN	55441 -
	CITY	•	STATE	ZIP CODE 📥
COMMITTEE'S E-MAII	ADDRESS (Please provide only one e-mail ad	dress)		
(Check if address is changed)	PAC@mosaicco.com			
COMMITTEE'S WEB F	PAGE ADDRESS (URL)			
(Check if address			1111	11111111
is changed)	1,,,,,,,,,,		1 1 1 1 1	
2. DATE 06	/ D D / Y Y Y Y Y Y Y 2 0 1 1			
3. FEC IDENTIFICATION		00455766	1	
			ı	
4. IS THIS STATEM	ENT X NEW (N) OR	AMENDED (A)		
I certify that I have examin	ed this Statement and to the best of my knowledge	and belief it is true, correct and	d complete	
	reasurer Kenneth Bodell			
Type or Print Name of	reasurer Kenneth Boden			
Signature of Treasurer	Electronically Filed by Kenneth Bodell		Date 0 6	15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
NOTE: Submission of fals	ee, erroneous, or incomplete information may subject	,		
Office		For further information c		
Use Only		Federal Election Commissi Toll Free 800-424-9530		FEC FORM 1 (Revised 02/2009)

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5.			OMMITTEE (Check One) Committee:	
	(a)		This committee is a principal campaign committee. (Complete the candidate information below.)	
	(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Complete information below.)	the candidate
	Name Candid			
	Candid Party		Office Sought: House Senate President	State District
	(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	Name Candid			
	Party	Comn		
	(d)		(National, State This committee is a (or subordinate) committee of the	(Democratic, Republican,etc.) Party.
	Politic	cal Act	tion Committee (PAC):	
	(e)	X	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	ed organization is a:
			X Corporation Corporation w/o Capital Stock	abor Organization
			Membership Organization Trade Association C	cooperative
	(f)	(f)	In addition, this committee is a Lobbyist/Registrant PAC.	
	(1)		This committee supports/opposes more than one Federal candidate, and is NOT a separate segregate committee. (i.e., nonconnected committee)	ed fund or party
			In addition, this committee is a Lobbyist/Registrant PAC.	
			In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
_				
	Joint F	undra	aising Representative:	
	(g)	Ш	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	or more political
	(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	or more political
		Com	mittees Participating in Joint Fundraiser	
			1. FEC ID number	
			2. FEC ID number	
			3. FEC ID number C	
			EEC ID number C	

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W	rite or Type Committee Name				
	MOS Holdings Inc. Poli	tical Action Committee ("Mosaic PAC")			
6.	Name of Any Connected Org	ganization, Affiliated Committee, Joint Fundrais	ing Representative, or Leade	ership PAC Sponsor	
1	MOS Holdings Inc.	<u> </u>			
ı					
	Mailing Address	3033 Campus Drive Suite E	190		
		Plymouth		55441 _	
		CITY▲	STATE ≜	ZIP CODE 🛕	
	Relationship:				
	X Connected Organization	Affiliated Committee Joint Fu	ndraising Representative	Leadership PAC Sponsor	
7.	Custodian of Records: Identify by name, address, (phone number optional), and position of the person in possession of Committee books and records.				
	Full Name Kennet	h Bodell			
	Mailing Address	3033 Camous Drive			
	Ç	Suite E490			
		Plymouth	MN	55441	
	Title or Position ♥	CITY A	STATE	ZIP CODE A	
			elephone number		
8.	name and address of any	and address (phone number optional) of t designated agent (e.g., assistant treasurer)		ttee; and the	
		3033 Camous Drive			
	Mailing Address	Suite E490			
		Plymouth	MN	55441	
	Title or Position ♥	CITY A	STATE ▲	ZIP CODE A	
			elephone number		
			'		

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Full Name of Designated Agent					
Mailing Address					
Title or Position ▼	CITY A	STATE A	ZIP CODE A		
	Telep	phone number			
9. Banks or Other Deposit safety deposit boxes or m.	Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents afety deposit boxes or maintains funds.				
Name of Bank, Depository					
As	sociated Bank				
Mailing Address	2655 Campus Drive				
	Plymouth	MN L	55441		
	CITY 🙇	STATE △	ZIP CODE 🛕		
Name of Bank, Depository	y, etc.				
Mailing Address					